

VEHICLE SAFETY SYSTEMS TECHNICIAN LICENSE APPLICATION INSTRUCTIONS

IMPORTANT: Complete the application in accordance with the instructions below and attach additional pages and supporting documentation as necessary. Submit the completed application and the \$10 fee* to the Bureau of Automotive Repair (BAR) at the address listed above. Make check or money order payable to the Department of Consumer Affairs (DCA).

- ***NO FEE FOR ACTIVE BRAKE AND LAMP LICENSEES:** If you currently hold both an active brake adjuster license AND an active lamp adjuster license, the application fee is waived. Do not include the \$10 fee.
- **FEES ARE NON-REFUNDABLE PURSUANT TO BUSINESS AND PROFESSIONS CODE SECTION 158.**
- Licensure is required for all persons inspecting vehicles for the purpose of certification in the Vehicle Safety Systems Inspection Program. (Business and Professions Code section 9888.6 and California Code of Regulations, title 16, section 3311.1)
- Applicants are required to meet the certification requirements as listed in this application and pass an examination to obtain a license. (Business and Profession Code section 9888.5(c)(2) and California Code of Regulations, title 16, section 3314.1) This requirement is waived if the applicant holds both an active brake adjuster license and an active lamp adjuster license. (California Code of Regulations, title 16, section 3314.1.1) If BAR cannot validate that certification requirements are met, a deficiency letter requesting the missing information and/or documentation will be sent to you. This will delay the processing of your application.
- The average processing time is four to six weeks from the receipt of your application, provided the application does not have any deficiencies.
- A license will be mailed to the address of record after your application is processed and approved. Licenses shall be posted prominently under glass or other transparent material in an area frequented by customers. (California Code of Regulations, title 16, section 3312.2)

REQUIRED INFORMATION: Complete all fields. If not applicable, indicate N/A. Attach additional pages if necessary.

1. **NAME:** Provide your full legal name as listed on your valid, government-issued photo identification (ID).
- 2-6. Provide the personal information requested.
7. **ADDRESS OF RECORD:** A PO Box or other non-residential address may be provided as the address of record. Your license will be sent to your address of record. The address of record is a public record and will be disclosed on BAR's website. (Business and Professions Code section 27)
8. **MAILING ADDRESS:** Provide the address at which you would like to receive correspondence. The mailing address must be either your physical business address or residential address and cannot be a PO Box. If this section is left blank, your address of record will be used as your mailing address. However, if your address of record is a PO Box you must provide a physical business or residential address as your mailing address.
9. **EMAIL ADDRESS:** Complete to receive correspondence from BAR by email.
10. **BRAKE ADJUSTER LICENSE NUMBER:** Provide your brake adjuster license number. If not applicable, indicate N/A.
11. **LAMP ADJUSTER LICENSE NUMBER:** Provide your lamp adjuster license number. If not applicable, indicate N/A.
12. **BACKGROUND:** Select YES or NO for each question. If YES, provide all applicable information and documentation. Any applicable information not provided may result in denial of this application or legal action to revoke the license.
13. **NATIONAL INSTITUTE FOR AUTOMOTIVE SERVICE EXCELLENCE (ASE) CERTIFICATION:** Provide information regarding your ASE certifications.

NOTE: If you hold **BOTH** an active brake adjuster license and an active lamp adjuster license, ASE certification is not required until the first renewal of your vehicle safety systems technician license.

14. **CERTIFICATION:** Read, sign, and date this section. Signatures affirm that all statements are true and correct. Any false statements made on this application may result in denial of this application or legal action later to revoke the license.

ADDITIONAL INFORMATION

CHANGE OF NAME OR ADDRESS

Licensees must notify BAR within 14 days of a change of name or address. (California Code of Regulations, title 16, section 3314.1) To report a change of name or address, complete a Change of Name/Address form available at www.bar.ca.gov.

RENEWAL OF LICENSE (DO NOT USE THIS APPLICATION TO RENEW YOUR LICENSE)

Vehicle safety systems technician licenses must be renewed every two years. License renewal and payment of fees may be completed online at www.bar.ca.gov. Licenses may also be renewed by submitting the renewal notice, or a copy of the license, and renewal fee to the address provided on the renewal notice. BAR makes every effort to mail you a courtesy renewal notice approximately 90 days before expiration of your current license. However, if you do not receive a renewal notice, you are still responsible for renewing your license(s). If you renew your license after the date of expiration, you will be charged a delinquency fee of \$5 in addition to the renewal fee of \$10 for a total of \$15.

NOTICE ON COLLECTION OF PERSONAL INFORMATION

BAR collects personal information only as allowed by law. Please see the [Notice on Collection of Personal Information](#) available at www.bar.ca.gov.

EXAMINATION INFORMATION

If your application is approved, you will be notified by the examination service contractor to schedule your examination.

NOTE: The examination is not required if you hold both an active brake adjuster license AND an active lamp adjuster license.

A fee will be charged for each examination and is payable directly to the examination service contractor.

You must bring two forms of ID to the examination. One must be a valid, government-issued photo ID (e.g., driver license, passport, or military). The second ID must have your signature and legal name (e.g., social security card, credit card, etc.). The name on this application must match the name on all identification you bring to the examination.

If you have a disability or impairment for which you need assistance during an examination, please obtain the Request for Special Accommodation During Administration of Written BAR Licensing Examination form available at www.bar.ca.gov or call the BAR Licensing Program at (855) 735-0462 to request the special accommodation form. This form must be completed by a health professional and submitted to the BAR Licensing Program with your application.

You must pass the examination within 90 days of receipt of notification that you are qualified to take the examination or submit a new application and fees for an examination that is scheduled beyond the 90-day period.

A new original application and fees are required after your second examination attempt or after your 90-day examination period has expired.

Examination cheating violates Business and Professions Code section 123 and can result in application denial, or suspension, revocation, or restriction of a license. Once the examination begins, no talking or other communication that may compromise examination security is permitted between applicants.

For complete examination instructions, refer to the Candidate Information Bulletin available at www.bar.ca.gov.



VEHICLE SAFETY SYSTEMS TECHNICIAN LICENSE APPLICATION

FEE \$10

**No fee is required for applicants that hold both an active brake adjuster license and an active lamp adjuster license*

FOR DEPARTMENT USE ONLY
License #:
Receipt #:
ATS #:
Date Processed:

Please type or print legibly in ink. Complete all fields. If not applicable, indicate N/A.

1. NAME		Last	First	Middle	2. DATE OF BIRTH	
3. SOCIAL SECURITY/INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER						
4. GOVERNMENT PHOTO ID ISSUING AUTHORITY, DOCUMENT TITLE, AND NUMBER (EXAMPLE: CALIFORNIA DRIVER LICENSE A123456)						
5. PRIMARY TELEPHONE NUMBER			6. ALTERNATE TELEPHONE NUMBER			
7. ADDRESS OF RECORD		Number and Street or PO Box	Suite or Unit #	City	State	Zip Code
<small>Note: Address will be posted on BAR's website.</small>						
8. MAILING ADDRESS		Number and Street	Suite or Unit #	City	State	Zip Code
9. EMAIL ADDRESS						
10. BRAKE ADJUSTER LICENSE NUMBER (If applicable)			11. LAMP ADJUSTER LICENSE NUMBER (If applicable)			
12. BACKGROUND						
a. Are you serving, or have previously served, in the United States Armed Forces?					YES	NO
b. Are you an honorably discharged member of the United States Armed Forces?					YES	NO
<small>If YES, you may qualify for expedited licensure. Attach the following documentation, if applicable: a certificate of release or discharge from active duty (DD-214) or other documentary evidence showing date and type of discharge. (Business and Professions Code section 115.4)</small>						
c. Do both of the following statements apply to you?					YES	NO
<ul style="list-style-type: none"> You are married to or in a domestic partnership or other legal union with an active duty member of the United States Armed Forces assigned to a duty station in California under official active duty military orders. You hold a current, active, and unrestricted license in another state, district, or territory of the United States. 						
<small>If YES, you may qualify for expedited licensure and a waiver of the application fee. Attach the following documentation: (1) a certificate of marriage/domestic partnership, (2) a copy of the military orders establishing the spouse's/partner's duty station in California, and (3) written verification from the licensing agency/entity stating that the applicant holds a current license in good standing. (Business and Professions Code section 115.5)</small>						
d. Do both of the following statements apply to you and are you seeking a 12-month temporary license pursuant to Business and Professions Code section 115.6?					YES	NO
<ul style="list-style-type: none"> You are married to or in a domestic partnership or other legal union with an active duty member of the United States Armed Forces assigned to a duty station in California under official active duty military orders. You hold a current, active, and unrestricted license in another state, district, or territory of the United States. 						
<small>If YES, attach the following documentation: (1) a certificate of marriage/domestic partnership, (2) a copy of the military orders establishing the spouse's/partner's duty station in California, and (3) written verification from the licensing agency/entity stating that the applicant holds a current license in good standing. DO NOT SUBMIT THE APPLICATION FEE WITH THIS APPLICATION.</small>						

<p>e. Are you a refugee, asylee, or holder of a special immigrant visa?</p> <p>If YES, you may qualify for expedited licensure. Attach the following documentation, as applicable: Form I-94, arrival/ departure record, with an admission class code such as "RE" (Refugee) or "AY" (Asylee) or other information designating the person a refugee or asylee; Special Immigrant Visa that includes "SI" or "SQ"; Permanent Resident Card (Form I-551), commonly known as a "Green Card," with a category designation indicating that the person was admitted as a refugee or asylee; an order from a court of competent jurisdiction or other documentary evidence that provides reasonable assurance that the applicant qualifies for expedited licensure. (Business and Professions Code section 135.4)</p>	<p>YES</p>	<p>NO</p>
<p>f. Has the Department of Consumer Affairs (DCA) or Bureau of Automotive Repair (BAR) ever issued you a license, certificate, or registration?</p> <p>If YES, provide the type of license(s) and license number(s).</p>	<p>YES</p>	<p>NO</p>
<p>g. Have you ever had a license, certificate, or registration denied, suspended, revoked, or placed on probation by DCA or BAR?</p> <p>If YES, provide a statement of explanation.</p>	<p>YES</p>	<p>NO</p>
<p>h. Has DCA or BAR ever issued you a citation?</p> <p>If YES, provide a statement of explanation.</p>	<p>YES</p>	<p>NO</p>
<p>i. Have you ever been convicted of any offense or entered a plea of nolo contendere in the United States or a foreign country?</p> <p>This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. NOTE: Convictions that were adjudicated in the juvenile court or convictions two years or older under California Health and Safety Code sections 11357(b), (c), (d), (e), or section 11360(b) should not be reported. Convictions that were later dismissed by the court or set aside pursuant to section 1203.4, 1203.4(a), 1203.41, 1203.42, or 1203.425 of the California Penal Code or equivalent non-California law MUST be disclosed.</p> <p>If YES, provide a statement of explanation, including the crime for which there was a conviction, the approximate date and location of the crime, and the sentence served, if any.</p>	<p>YES</p>	<p>NO</p>

<p>j. Exclusive of juvenile court adjudications and criminal charges dismissed under section 1000.3 of the California Penal Code or equivalent non-California laws, or convictions two years or older under California Health and Safety Code sections 11357(b), (c), (d), (e), or section 11360(b), have you had a conviction that was later dismissed or set aside by the court?</p> <p>If YES, provide a statement of explanation.</p>	YES	NO
<p>k. Is any administrative or criminal action pending against you, or are you currently awaiting judgment and sentencing following entry of a plea or jury verdict?</p> <p>If YES, provide a statement of explanation.</p>	YES	NO

13. ASE CERTIFICATION (Not required if you hold both an active brake adjuster license AND an active lamp adjuster license. However, certification is required for license renewal.)

I am certified by the National Institute for Automotive Service Excellence (ASE) in all three of the following areas:

Suspension and Steering (A4)	Expiration date: _____
Brakes (A5)	Expiration date: _____
Electrical/Electronic Systems (A6)	Expiration date: _____

14. CERTIFICATION

I certify under penalty of perjury under the laws of the state of California that all the statements I have made in this application and all attached supporting documents pertaining to this application are true and correct.

SIGNATURE OF APPLICANT _____ DATE _____

NOTE: Once submitted, your application and supporting documentation become the property of BAR and will be kept as a matter of record. MAKE A COPY OF THIS COMPLETED AND SIGNED APPLICATION FOR YOUR RECORDS.